

Health Care Financing Notes

Medicare: Use of Long-Stay Hospital
Services, 1978

PUBS
RA
412
.3
M4332
1978 long-stay,
hosp. use



Health Care Financing Administration
Office of Research and Demonstrations
HCFA Pub. No. 03159
September 1983

KA
412.3
.M4332
1978
long-stay
hosp. use
c.3

MEDICARE: USE OF LONG-STAY
HOSPITAL SERVICES, 1978

This Note presents estimates on the use and amounts reimbursed for Hospital Insurance (HI) beneficiaries discharged from participating long-stay hospitals under Medicare during 1978. Long-stay hospitals are those hospitals participating in the Medicare program where the average length of stay is 30 days or more.¹ Long-stay hospital services, like short-stay hospital services, are covered under the inpatient hospital benefits of the Medicare HI program.

Longitudinal data on the amounts reimbursed for inpatient services in long-stay hospitals under Medicare are presented in Table 1 for the years 1969-78. Utilization and reimbursement data by type of hospital and type

This Note is one of a series prepared in the Office of Research, Judith Lave, Director, to provide a description and analysis of the use and cost of the health care benefits furnished to the beneficiaries of the Medicare and Medicaid programs administered by the Health Care Financing Administration. This Note was written under the administrative supervision of Allen Dobson, Director, Division of Beneficiary Studies. The statistical files used for the Note were developed and maintained by the Office of Statistics and Data Management in the Bureau of Data Management and Strategy. The programming services for the production of the tables were provided by Vikki Latta, Betty Gunn, and Cheryl Black.

¹For the statutory definition of providers and suppliers of services and the detailed conditions for participating under Medicare, see Medicare Program Regulations, 42 CFR, Part 405, Subpart S, Health Care Financing Administration.

of entitlement are presented in Table 2. Utilization data by State of residence are presented in Table 3. Table 4 presents reimbursement data by State of residence. To facilitate comparisons, the tables in this Note show data on use and reimbursements of long-stay hospitals in relation to total Medicare inpatient hospital use and reimbursements.

The inpatient hospital benefits under the Medicare HI program have been provided to persons 65 years of age and over since July 1, 1966. Effective July 1, 1973, the same HI benefits were extended to persons under 65 years of age who were entitled to cash benefits for not less than 24 consecutive months under the disability insurance program and to persons with end-stage renal disease (ESRD).²

The highlights of the data shown in the tables are:

Reimbursement Trends, 1969-78

Between 1969 and 1978 reimbursements for long-stay hospital care increased from an estimated \$77.4 million to \$250.2 million - an average annual rate of increase of about 13.9 percent.

The major increases occurred after 1973, when Medicare coverage was extended to the disabled. However, between 1977 and 1978, reimbursements increased by only 2.7 percent (Table 1).

²The Social Security Amendments of 1980 (P.L. 96-265) amended the 24 consecutive months provision beginning December 1980 to provide that months from previous period of disability benefit entitlement may be counted in determining when the 24 month qualifying period requirement is met provided the current onset begins within certain time limits following the earlier period of entitlement. The period covered in this Note antedates this provision.

- . During the period 1969 through 1974, long-stay hospital reimbursements as a percent of total Medicare inpatient hospital reimbursements ranged between 1.7 to 2.0 percent. Although the amounts reimbursed for long-stay hospital services increased rapidly after the inclusion of the disabled under Medicare, as a percentage of total inpatient hospital reimbursements it has been decreasing since 1974. By 1978, it had decreased to 1.5 percent.
- . The above pattern probably reflects a marked shift in the locus of care for persons with psychiatric disorders from large State hospitals to smaller community-based facilities.

Utilization and Reimbursement, 1978

- . The estimated 113,185 discharges from long-stay hospitals in 1978 accounted for approximately 2.75 million covered days of care, an average of 24.3 days per discharge. The covered length of stay for long-stay hospital discharges was about two weeks longer than for short-stay hospital discharges (10.5 days) (Table 2).
- . In relation to total Medicare inpatient hospital utilization and reimbursements, discharges from long-stay hospitals accounted for approximately 1.2 percent of all discharges, 2.7 percent of the total covered days of care, and 1.5 percent of reimbursements.
- . Medicare reimbursement for long-stay hospital care averaged \$2,211 per discharge and \$91 per covered day; the corresponding averages for short-stay hospital discharges were \$1,717 and \$164, respectively.

Type of Entitlement and Type of Hospital, 1978

- . Approximately 40 percent of all discharges from long-stay hospitals were disability beneficiaries. In contrast, about 12 percent of all short-stay hospital discharges were disability beneficiaries (Table 2). On July 1, 1978, about 10.4 percent of all Medicare HI enrollees were disabled (2,793,206). The remainder (23,984,057) were aged.
- . About 57 percent of all long-stay hospital discharges were from psychiatric hospitals. For the disabled, about 78 percent of all long-stay discharges were from psychiatric hospitals; for the aged, about 42 percent of all long-stay discharges were from psychiatric hospitals.
- . Covered days of care per discharge for aged beneficiaries from long-stay hospitals (24.6 days) was nearly 1 day longer than for disabled beneficiaries (23.8 days). By type of hospital control, the average covered length of stay was nearly a half day longer in psychiatric hospitals (24.5 days) than in all other long-stay hospitals (24.1 days).
- . The mean reimbursement per long-stay hospital discharge for aged beneficiaries (\$2,434) was nearly \$600 higher than that for disabled beneficiaries (\$1,869). This reflected the higher proportion of discharges of aged persons from long-stay hospitals other than psychiatric. The mean reimbursement per discharge for all other long-stay hospitals (\$2,910) was over \$1,200 higher than that for discharges from psychiatric hospitals (\$1,672). The average reimbursement per day in all other long-stay hospitals (\$121) was 78 percent higher than the amount for psychiatric hospitals (\$68).

State of Residence, 1978

- . Use of long-stay hospital care varied considerably by State of residence. In Idaho, there were no long-stay hospitals participating in the Medicare program. (About 50 beneficiaries residing in Idaho received long-stay services in hospitals outside the State.) In contrast, California and New York recorded nearly 19 percent of all discharges from long-stay hospitals (Table 3).
- . Among States with long-stay hospitals, covered days of care per discharge ranged from a low of 16.3 days in Maine to a high of 33.4 days in Nevada.
- . Delaware had the highest ratio of long-stay hospital to total inpatient hospital use. In Delaware, 4.2 percent of all inpatient hospital discharges were from long-stay hospitals accounting for 9.2 percent of all inpatient hospital covered days of care. Hawaii accounted for the highest ratio (5.2 percent) of long-stay hospital reimbursements to total inpatient hospital reimbursements (Table 4).
- . The average reimbursement per long-stay hospital discharge ranged from a low of \$862 in South Carolina to a high of \$4,537 in Hawaii. The average reimbursement per covered day of care ranged from \$27 in South Carolina to \$146 in Mississippi.

SOURCES AND LIMITATIONS OF DATA

Data published in this Note were derived from billing forms for inpatient services submitted for payment by hospitals (short-stay and long-stay) for a 20-percent sample of HI beneficiaries. They cover all discharges, including death during hospitalization. Discharge records, which represent the history of the person's hospital stay, are prepared for the HI beneficiaries in the sample discharged from inpatient hospitals. The sample counts are multiplied by 5 to estimate national totals. To prepare discharge records, information from the bill records is matched to the master "Health Insurance Eligibility" file, which contains information on the beneficiaries' demographic characteristics, including State of residence. This record is then matched to the Provider of Services master file which contains information on the characteristics of each participating hospital.

Three key limitations must be considered when analyzing the data shown in this report: (1) sampling variability, (2) exclusions, and (3) bill-processing time lag. First, since the figures shown are derived from a 20-percent sample of HI beneficiaries, they are subject to sampling variability. Second, excluded from the file used to prepare this report were those hospital discharge records without a discharge indicator and those hospital discharge records without at least one covered day of care. Last, and perhaps most important, the lag between the time when a bill is submitted and processed for payment and when a discharge record is prepared results in the incompleteness of the 1978 discharge record file.

Reimbursement data shown in Table 1 represent bill records processed through December 1980 and recorded in HCFA control tabulations. For all inpatient short-stay hospital and long-stay hospital services, amounts shown for calendar year 1969-77 represent a "complete" tabulation (close to 100 percent) of expenditures. Amounts shown for calendar year 1978 should be regarded only as estimates for reasons discussed below.

Utilization and reimbursement data for 1978 shown in Tables 2, 3, and 4 are based on discharge records processed through June 1979. Discharge records processed and recorded after that date were not included.

The discharges, covered days, and amounts reimbursed shown in Tables 2, 3, and 4 reflect adjustments to account for data processing lags; that is, discharge records that were not processed as of June 1979. To estimate "complete" utilization and reimbursement amounts for short-stay hospital services in 1978, the short-stay discharge record counts were inflated by about 2 percent to reflect bill records processed through December 1980. Because there is a longer lag in the submission and processing of long-stay hospital bills and discharge records, the long-stay hospital discharge record counts from the June 1979 file were inflated by about 10 percent to reflect bill record counts as of December 1980.

The purpose of Table 2 is to show the relationship of long-stay hospital use to all inpatient hospital use. The distribution among the States is shown in Tables 3 and 4. Due to the data limitations noted above, the long-stay hospital utilization and cost estimates for individual states should be used with caution. However, these limitations should not significantly affect the averages and distributions for the individual States.

DEFINITIONS

Covered day of care - A day of inpatient hospital care during which the services (determined to be medically necessary by the Professional Standards Review Organization or the Utilization Review Committee) covered by Medicare were furnished to a person eligible for HI benefits. The day of discharge is not counted as a day of care.

Discharge - The formal release of a patient from a hospital. Discharges include persons who died during their hospitalization or were transferred to another hospital.

Reimbursement - Payments under the HI program which are shown in this Note are based on interim reimbursement rates reported on processed bills. The interim rates are established to reflect current costs as closely as possible. These are usually established as a per diem amount or as a percentage of total charges. Figures shown exclude amounts for which the patient is responsible such as deductibles, coinsurance, and charges for noncovered services. The final amount of reimbursement due under Medicare to each provider of medical services is determined after the end of the fiscal year on the basis of the providers audited reasonable cost of operations.

Hospital -An institution engaged in providing to inpatients, by or under the supervision of physicians, diagnostic and therapeutic services for medical treatment of injured, disabled, or sick persons.

Short-stay hospital - A hospital where the average length-of-stay is less than 30 days.

Long-stay hospital - A hospital where the average length-of-stay is 30 days or more.

Psychiatric hospital - An institution primarily engaged in providing to inpatients, by or under the supervision of a physician, psychiatric services for the diagnosis and treatment of mental illness.

State - Refers to the State where the beneficiary is living, not the State where he or she received services.

TABLE 1

Total Medicare Inpatient Hospital Reimbursement and Long-Stay
Hospital Reimbursement, 1969-78 1/

(amount in millions)

Calendar Year	Total Inpatient Hospital Reimbursement		Long-Stay Hospital Reimbursement		
	Amount	Percent Change	Amount	Percent Change	Percent of Inpatient Reimbursement
1969	\$ 4 178.2	-	\$ 77.4	-	1.9
1970	4,656.3	11.5	83.7	10.8	1.8
1971	5,250.5	12.8	90.0	16.3	1.7
1972	5,776.1	10.0	98.6	9.6	1.7
1973	6,801.1	17.7	132.1	34.0	1.9
1974	8,238.6	21.1	165.0	24.9	2.0
1975	10,181.4	23.6	190.3	15.3	1.9
1976	12,485.5	21.4	212.9	11.9	1.7
1977 2/	14,362.0	15.0	243.7	14.5	1.7
1978 3/	16,228.8	13.0	250.2	2.7	1.5

1/ Amounts based on bill records processed through December 1980 and recorded in HCFA utilization tabulations.

2/ Revised estimates.

3/ Preliminary estimates.

TABLE 2

Number of Discharges, Covered Days of Care, and Amounts Reimbursed for Participating Medicare Hospitals,
by Type of Hospital and Type of Entitlement, 1978 1/

Type of Entitlement and Type of Hospital	Discharges 2/			Covered Days			R e i m b u r s e m e n t			
	Total	Percent of Total	Total (in thousands)	Percent of Total	Per Discharge	Amount (in thousands)	Percent of Total	Per Discharge	Per Day	
All Medicare Enrollees	9,422,292	100.0	100,399.0	100.0	10.7	\$16,228,795.8	100.0	\$1,722	\$162	
Short-Stay	9,309,107	98.8	97,648.5	97.3	10.5	15,978,591.8	98.5	1,717	164	
Long-Stay	113,185	1.2	2,750.5	2.7	24.3	250,204.0	1.5	2,211	91	
Psychiatric	63,968	.7	1,564.5	1.5	24.5	106,962.2	.6	1,672	68	
All Other	49,217	.5	1,186.0	1.2	24.1	143,241.8	.9	2,910	121	
Aged	8,297,270	88.0	88,732.6	88.4	10.7	14,310,552.0	88.2	1,725	161	
Short-Stay	8,228,816	87.3	87,049.0	86.7	10.6	14,143,941.1	87.2	1,719	162	
Long-Stay	68,454	.7	1,683.6	1.7	24.6	166,610.8	1.0	2,434	99	
Psychiatric	29,038	.3	731.6	.7	25.2	52,948.9	.3	1,823	72	
All Other	39,416	.4	952.0	1.0	24.2	113,661.9	.7	2,884	119	
Disabled	1,125,022	12.0	11,666.4	11.6	10.4	1,918,243.7	11.8	1,705	164	
Short-Stay	1,080,291	11.5	10,599.5	10.6	9.8	1,834,650.5	11.3	1,698	173	
Long-Stay	44,731	.5	1,066.9	1.0	23.8	83,593.2	.5	1,869	78	
Psychiatric	34,930	.4	832.9	.8	23.8	54,017.9	.3	1,547	65	
All Other	9,801	.1	234.0	.2	23.9	29,575.3	.2	3,018	126	

1/ Based on discharge records processed through June 1979 and included in the file used to prepare this report.
See the section Sources and Limitations of the Data.

2/ Excludes discharges with zero covered days of care.

TABLE 3

Number of Discharges, Covered Days of Care, and Average Length of Covered Stay per Discharge for Participating Medicare Hospitals, by Region, Division, and State, 1978 1/

Area of Residence	Discharges 2/			Covered Days of Care (in thousands)			Average Length of Covered Stay Per Discharge		
	All Hospitals Number	Long-Stay Hospitals		All Hospitals Number (in thousands)	Long-Stay Hospitals		All Hospitals	Long-Stay Hospitals	
		Number	Percent of all Discharges		Number (in thousands)	Percent of Total Covered Days of Care			
All Areas	9 422,292	113 185	1.2	100,399.0	2,750.5	2.7	10.7	24.3	
United States 3/	9 354,223	112,136	1.2	99,683.9	2,726.4	2.7	10.7	24.3	
Northeast	1 982 008	30 659	1.5	25 502.1	822.5	3.2	12.9	26.8	
North Central	2,639 589	25 245	1.0	28,814.7	610.9	2.1	10.9	24.2	
South	3,303,078	38 515	1.2	32,735.1	919.9	2.8	9.9	23.9	
West	1,432,469	17,718	1.2	12,632.0	373.2	3.0	8.8	21.1	
New England	510,426	8,274	1.6	5,906.7	195.6	3.3	11.6	23.6	
Connecticut	111,143	3 185	2.9	1,283.6	69.7	5.4	11.5	21.9	
Maine	54 640	216	.4	532.5	3.5	.7	9.7	16.3	
Massachusetts	247,385	3,865	1.6	3,054.4	99.4	3.3	12.3	25.7	
New Hampshire	35 893	228	.6	350.4	7.3	2.1	9.8	31.8	
Rhode Island	38,819	619	1.6	455.8	11.5	2.5	11.7	18.6	
Vermont	22,636	161	.7	232.9	4.3	1.8	10.3	26.7	
Middle Atlantic	1,471,662	22,385	1.5	19,595.3	626.8	3.2	13.3	28.0	
New Jersey	273 761	4,145	1.5	3 683.2	112.1	3.0	13.5	27.0	
New York	664 629	10,013	1.5	9,389.0	272.3	2.9	14.1	27.2	
Pennsylvania	533,273	8 228	1.5	6,523.2	242.5	3.7	12.2	29.5	
East North Central	1,702,390	17,388	1.0	19,433.7	431.0	2.2	11.4	24.8	
Illinois	489 374	5,656	1.2	5,673.2	109.8	1.9	11.6	19.4	
Indiana	218,414	766	.4	2,385.3	14.5	.6	10.9	18.9	
Michigan	351 976	3,858	1.1	4,075.1	110.9	2.7	11.6	28.8	
Ohio	434,805	4 911	1.1	5,098.9	140.6	2.8	11.7	28.6	
Wisconsin	207,820	2,198	1.1	2,201.3	55.1	2.5	10.6	25.1	
West North Central	937,198	7,856	.8	9,381.0	179.9	1.9	10.0	22.9	
Iowa	165,341	636	.4	1,557.9	16.7	1.1	9.4	26.3	
Kansas	141 327	693	.5	1,417.0	19.8	1.4	10.0	28.6	
Minnesota	193 075	1,100	.6	1,891.4	32.8	1.7	9.8	29.9	
Missouri	268,493	4,241	1.6*	2,964.4	83.6	2.8	11.0	19.7	
Nebraska	89,231	547	.6	850.5	13.9	1.6	9.5	25.5	
North Dakota	38,166	516	1.4	339.2	10.7	3.2	8.9	20.8	
South Dakota	41,565	123	.3	309.5	2.3	.6	8.7	18.9	

TABLE 3

Number of Discharges, Covered Days of Care, and Average Length of Stay per Discharge for Participating Medicare Hospitals, by Region, Division, and State, 1978 1/

Area of Residence	Discharges 2/			Covered Days of Care (in thousands)			Average Length of Covered Stay Per Discharge	
	All Hospitals Number	Long-Stay Hospitals		All Hospitals Number (in thousands)	Long-Stay Hospitals		All Hospitals	Long-Stay Hospitals
		Number	Percent of all Discharges		Number (in thousands)	Percent of Total Covered Days of Care		
South Atlantic	1 537,592	21,910	1.4	16 005.6	566.0	3.5	10.4	25.8
Delaware	19 919	838	4.2	250.0	23.1	9.2	12.6	27.6
District of Columbia	18 536	214	1.2	254.0	7.0	2.7	13.7	32.6
Florida	554 025	4 216	.8	5,423.0	96.7	1.8	9.8	22.9
Georgia	213 168	2 389	1.1	1,875.1	40.8	2.2	8.8	17.1
Maryland	121 648	3 730	3.1	1,579.5	113.7	7.2	13.0	30.5
North Carolina	223 812	6,556	2.9	2,449.4	170.9	7.0	10.9	26.1
South Carolina	101 795	1,395	1.4	1,027.1	44.9	4.4	10.1	32.2
Virginia	182 875	1,905	1.1	2,130.1	58.6	2.8	11.6	29.5
West Virginia	101 815	587	.6	1,017.3	10.3	1.0	10.0	17.5
East South Central	719,250	4 799	.7	7,005.7	101.3	1.4	9.7	21.1
Alabama	191 629	1 113	.6	1 804.0	19.3	1.1	9.4	17.4
Kentucky	170 722	1 489	.9	1,664.0	34.5	2.1	9.7	23.1
Mississippi	139,431	337	.2	1,369.9	8.9	.7	9.8	26.5
Tennessee	217 467	1 859	.9	2,167.9	38.5	1.8	10.0	23.7
West South Central	1,043,236	11,806	1.1	9,723.8	252.7	2.6	9.3	21.4
Arkansas	147 861	1 230	.8	1,306.7	22.0	1.7	8.8	17.9
Louisiana	169,443	1,342	.8	1,601.9	38.0	2.4	9.5	28.3
Oklahoma	157,360	1,529	1.0	1,429.2	34.5	2.4	9.1	22.5
Texas	568,572	7,704	1.4	5,306.0	158.2	2.9	9.5	20.5
Mountain	367,818	3,255	.9	3,263.8	74.0	2.3	8.9	22.7
Arizona	93,472	613	.7	891.8	13.3	1.5	9.5	21.8
Colorado	96 315	1,769	1.8	921.3	42.4	4.6	9.6	24.0
Idaho 4/	33,592	49	.1	258.9	.3	.1	7.7	6.4
Montana	36,591	44	.1	283.9	1.0	.3	7.8	21.8
Nevada	22,575	99	.4	201.5	3.3	1.6	8.9	33.4
New Mexico	37,956	323	.9	317.9	6.5	2.1	8.4	20.2
Utah	31 739	259	.8	248.6	4.6	1.9	7.8	17.9
Wyoming	15 578	98	.6	139.9	2.4	1.7	9.0	24.9
Pacific	1 064,650	14 463	1.4	9,368.3	299.2	3.2	8.8	20.7
Alaska	3 052	50	1.6	28.3	1.4	5.0	9.3	28.7
California	800,508	11,651	1.5	7,284.3	224.5	3.1	9.0	19.3
Hawaii	19,529	452	2.3	203.5	15.0	7.4	10.4	33.3
Oregon	98 596	1,107	1.1	820.8	28.2	3.4	8.3	25.5
Washington	142,965	1 204	.8	1,111.3	30.0	2.7	7.8	25.0
Other Areas	68,069	1,048	1.5	715.1	24.0	3.4	10.5	22.9
Puerto Rico	62 812	1 011	1.6	652.1	23.1	3.5	10.4	22.8
All Other Areas	5 258	38	.7	63.1	1.0	1.5	12.0	25.3

1/ Based on discharge records processed through June 1979 and included in the file used to prepare this report. See the section Sources and Limitations of the Data.

2/ Excludes discharges with zero covered days of care.

3/ Excludes Puerto Rico and all other areas.

4/ Amounts shown for Long-Stay Hospitals represent services received outside the state of Idaho.

TABLE 4

Amounts Reimbursed for Participating Medicare Hospitals, by Region, Division, and State, 1978 1/

Area of Residence	R e i m b u r s e m e n t					
	All Hospitals			Long-Stay Hospitals		
	Amount (in thousands)	Per Discharge	Per Day	Amount (in thousands)	Percent of Total Reimburse- ment	Per Discharge Day
All Areas	\$16,228 795.8	\$1,722	\$162	\$250,204.0	1.5	\$2,211 \$ 91
United States 2/	16,175 358.9	1,729	162	248 989.5	1.5	2,220 91
Northeast	4 185,182 9	2,112	164	87 317.8	2.1	2,848 106
North Central	4 636,444 5	1,757	161	54 192.5	1.2	2,147 89
South	4 583 048.7	1 389	140	63 957.6	1.4	1 661 70
West	2,770,682.9	1 934	219	43 521.6	1.6	2,456 117
New England	1 088,938.0	2 133	184	18 199.4	1.7	2 200 93
Connecticut	240 867.5	2,167	188	6 306.3	2.6	1 980 91
Maine	88,195.5	1 614	166	198.0	.2	918 56
Massachusetts	589,473 4	2 383	193	10 017.9	1.7	2 592 101
New Hampshire	54 294.4	1 516	155	360.9	.7	1 584 50
Rhode Island	83 156.7	2 142	182	1 089.2	1.3	1 759 94
Vermont	32 950.5	1 456	141	227.1	.7	1 410 53
Middle Atlantic	3 096,245.0	2 104	158	69 118.4	2.2	3 088 110
New Jersey	545 808.7	1 994	148	9 765.9	1.8	2 356 87
New York	1 556 130.3	2 341	166	34 105.9	2.2	3 406 125
Pennsylvania	994 306.0	1 865	152	25 246.6	2.5	3 068 104
East North Central	3 260 156.0	1 915	168	42 010.2	1.3	2 416 97
Illinois	995 995.9	2 035	176	13 746.4	1.4	2 431 125
Indiana	355 732.5	1 629	149	1 356.4	.4	1 770 93
Michigan	764 635 9	2 172	188	10 689.6	1.4	2 771 96
Ohio	786 768.8	1 809	154	12 015.7	1.5	2 447 85
Wisconsin	357 023.0	1 718	162	4 202.1	1.2	1 912 76
West North Central	1 376 288.5	1 469	147	12 182.2	.9	1 551 68
Iowa	224 647 8	1 359	144	775.9	.3	1 219 46
Kansas	199 987.2	1 415	141	1 300 7	.7	1 877 66
Minnesota	306 830.5	1 589	162	1 796.9	.6	1 633 55
Missouri	428 202.6	1 595	144	6 125.6	1.4	1 444 73
Nebraska	116 100.0	1 301	137	922.0	.8	1 687 66
North Dakota	51 716 5	1 355	152	1 130.4	2.2	2 192 106
South Dakota	48 804.3	1 174	135	130.7	.3	1 060 56
South Atlantic	2 396 253.3	1 558	150	35 922.7	1.5	1 640 63
Delaware	41 098.9	2 063	164	1 766.1	4.3	2 108 76
District of Columbia	56 527 7	3 050	223	567.1	1 0	2 649 81
Florida	927 732.2	1 675	171	6 858.9	.7	1 627 71
Georgia	257 358.8	1 207	137	3 079.3	1.2	1 289 75
Maryland	294 231 6	2 419	186	8 744.0	3.0	2 344 77
North Carolina	297 363 7	1 329	121	10 147.0	3 4	1 548 59
South Carolina	126 121.7	1 239	123	1 202.7	1.0	862 27
Virginia	272 058.3	1 488	128	2 936 0	1 1	1 479 50
West Virginia	123 761.0	1 216	122	621.7	.5	1 053 60

TABLE 4

Amounts Reimbursed for Participating Medicare Hospitals, by Region, Division, and State, 1978 1/

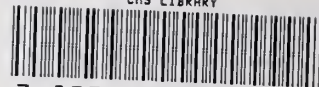
Area of Residence	R e i m b u r s e m e n t					
	All Hospitals			Long-Stay Hospitals		
	Amount (in thousands)	Per Discharge	Per Day	Amount (in thousands)	Percent of Total Reimburse- ment	Per Discharge Day
East South Central						
Alabama	848,590.1	1,180	121	7,644.4	.9	1,593
Kentucky	234,166.6	1,222	130	1,794.1	.8	1,612
Mississippi	202,855.4	1,188	122	2,333.0	1.2	1,566
Tennessee	144,520.1	1,036	105	1,307.5	.9	3,876
	267,048.4	1,228	123	2,209.8	.8	1,189
West South Central						
Arkansas	1,338,205.3	1,283	138	20,390.4	1.5	1,727
Louisiana	146,317.6	990	112	1,813.4	1.2	1,474
Oklahoma	206,139.2	1,217	129	1,850.8	.9	1,379
Texas	214,177.0	1,361	150	1,628.7	.8	1,065
	771,572.0	1,357	143	15,097.6	2.0	1,960
Mountain						
Arizona	558,534.7	1,519	171	6,602.8	1.2	2,029
Colorado	160,541.9	1,718	180	916.3	.6	1,496
Idaho 3/	150,297.7	1,560	163	4,127.6	2.7	2,333
Montana	43,126.1	1,284	167	40.7	.1	824
Nevada	44,371.7	1,213	156	96.9	.2	2,183
New Mexico	42,253.0	1,872	210	333.4	.8	3,362
Utah	52,810.8	1,391	166	597.3	1.1	1,847
Wyoming	45,718.9	1,440	184	289.2	.6	1,118
	19,415.1	1,246	139	201.4	1.0	2,056
Pacific						
Alaska	2,212,148.2	2,078	236	36,918.8	1.7	2,553
California	8,054.6	2,639	285	97.4	1.2	1,959
Hawaii	1,767,795.3	2,208	245	31,461.6	1.8	2,700
Oregon	39,669.4	2,031	195	2,049.6	5.2	4,537
Washington	172,548.9	1,750	210	1,546.0	.9	1,396
	224,080.2	1,567	202	1,764.3	.8	1,466
Other Areas						
Puerto Rico	53,436.9	785	75	1,214.5	2.3	1,158
All Other Areas	42,561.2	678	65	1,076.1	2.5	1,065
	10,875.9	2,069	172	138.4	1.3	3,660

1/ Based on discharge records processed through June 1979 and included in the file used to prepare this report. See the section Sources and Limitations of the Data.

2/ Excludes Puerto Rico and all other areas

3/ Amounts shown for Long-Stay Hospitals represent services received outside the state of Idaho.

CMS LIBRARY



3 8095 00011877 4